

Control of Communicable Diseases

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BUREAU OF MEDICINE AND SURGERY

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CONTROL OF COMMUNICABLE DISEASES IN MAN
NAVEDTRA 13111A

INTRODUCTION: This five assignment course is based on the Control of Communicable Diseases Manual, 1995 Edition written by Abram S. Benenson.

The development of this course was completed by HMCS (FMF) Cheri Inverso at the Naval School of Health Sciences, Portsmouth, Virginia.

ADMINISTRATION: Contact Point: This course is administered by NSHS Portsmouth. All answer sheets, questions, and comments should be directed to:

Naval School of Health Sciences
1001 Holcomb Road
Attn: Medical Correspondence
PORTSMOUTH, VIRGINIA 23708-5200

MATERIALS: Your course materials include: the Control of Communicable Diseases Manual, 1995 Edition, an assignment booklet, and a supply of answer sheets.

INSTRUCTIONS: All items are of the objective type and should be answered on the basis of the assigned readings in the text, regardless of your personal opinion or experience. The questions are intended to direct your study and test your understanding. The assignments have been arranged in sequence and should be completed in that order. Study the readings until you are familiar with the material and then answer the questions. Mark your answers on the enclosed answer sheets.

While working on this correspondence course, you may refer freely to the text. You may seek advice and instruction from others on problems arising in the course, but the solutions submitted must be the result of your own work and decisions. You are prohibited from referring to or copying the solutions of others, or giving completed solutions to anyone else taking the same course.

SUBMISSION: The entire course must be completed in 90 days!!!!!! If you require additional time, please contact this office. All assignments must be sent to:

NAVAL SCHOOL OF HEALTH SCIENCES
1001 HOLCOMB ROAD
ATTN: MEDICAL CORRESPONDENCE
PORTSMOUTH, VIRGINIA 23708-5200

- GRADING SYSTEM:** The passing grade for this course or for each creditable unit is 3.4. You may resubmit any failed assignment, but the maximum grade for resubmitted assignments is 3.4. Should both the original and resubmitted assignment earn under 3.4, the higher grade will be posted. Retain all course material until you have received notification of satisfactory course completion. A COMPLETION LETTER WILL BE ISSUED UPON RECEIPT OF THE TEXTBOOK AT NSHS PORTSMOUTH.
- COMPLETION LETTER:** A course completion letter will be issued. But Completion Credit will be held until Civilian Textbook is returned. Naval Reserve Officers should anticipate a delay of 4-6 weeks in delivery of certification of course and unit completions, since these must be forwarded via Naval Reserve Personnel Center, New Orleans, LA 70149 for recording and endorsement. IT IS IMPORTANT FOR YOU TO KEEP YOUR COMPLETION LETTER ON FILE FOR FUTURE REFERENCE.
- RESERVE RETIREMENT:** For purposes of Naval Reserve Retirement, this course is evaluated at 8 points. These points are creditable only to personnel eligible to receive them under current directives governing retirement of Naval Reserve personnel. After satisfactory completion of the course, retirement points will be credited by the Chief, Naval Reserve Personnel. IT IS IMPORTANT FOR YOU TO KEEP A COMPLETE AND ACCURATE RECORD OF ALL COURSES COMPLETED.
- COMMENTS:** Please return the comment sheet that is located at the back of the book.

CONTROL OF COMMUNICABLE DISEASES
PRIVATE
NAVEDTRA 13111A

ASSIGNMENT ONE

READING ASSIGNMENT: Control of Communicable Diseases Manual, 16th Edition, pages 1 through 106.

1. Most people infected with HIV develop detectable antibodies within .
 1. 1-3 days
 2. 1-3 weeks
 3. 1-3 months
 4. 1-3 years
2. Many people develop a mononucleosis-like illness lasting several weeks to months after infection with HIV.
 1. T
 2. F
3. Which is NOT a route of transmission of HIV?
 1. heterosexual intercourse
 2. breast feeding from infected mother
 3. tears of an infected person
 4. sharing HIV contaminated IV needles and syringes
4. About half of all HIV infected adults have developed AIDS within years after infection.
 1. 2
 2. 5
 3. 10
 4. 12
5. Methods of prevention control for HIV include .
 1. care in handling, use, and disposal of needles and sharp instruments
 2. use of latex condoms with water-based lubricants
 3. avoidance of multiple sex partners and sharing of drug paraphernalia
 4. all of the above
6. The causative agent in Acquired Immunodeficiency Syndrome is a(an) .
 1. lymphocyte
 2. retrovirus
 3. bacteria
 4. unknown virus

7. Which of the following is NOT a universal precaution for health workers dealing with possible HIV patients?
 1. gloves
 2. face shields
 3. gowns
 4. shoe covers
8. Which of the following kinds of parasites is responsible for amebiasis?
 1. Cestoidea
 2. Nematoda
 3. Protozoa
 4. Trematoda
9. Amebiasis can vary from acute or fulminating dysentery to mild abdominal discomfort with diarrhea containing blood or mucus alternating with periods of constipation or remission.
 1. T
 2. F
10. The etiologic agent of amebiasis is ?
 1. E. hartmanni
 2. E. histolytica
 3. S. dysenteriae
 4. S. sonnei
11. Outbreaks of amebiasis are usually associated with ingestion of contaminated?
 1. meat
 2. drinking water
 3. milk
 4. fruits
12. A number of workers processing goat and sheep hides in a factory in Montana complained of a painless papule or vesicle that later developed into a depressed black eschar. In others, there were mild and nonspecific initial symptoms of upper respiratory infection, followed by acute respiratory distress, fever, and shock in 3-5 days. Shortly thereafter death usually occurred. The disease was identified as woolsorter's disease. What other name is it known by?
 1. Yaws
 2. Tularemia
 3. Anthrax
 4. Plague

13. The infectious agent for Anthrax is a Gram-positive, encapsulated, spore-forming, nonmotile rod called?
1. Herpes simplex virus
 2. Borrella anthraces
 3. Ducrey bacillus
 4. Bacillus anthraces
14. Persons diagnosed with inhalation anthrax must be placed in respiratory isolation to prevent the spread of the disease. 1. True
2. False
15. What is the drug of choice for treating Anthrax?
1. Erythromycin
 2. Penicillin
 3. Sulfadiazine
 4. Tetracycline
16. Measures for controlling the spread of anthrax include sterilizing wool and bone meal, burying carcasses deeply and covering with quick lime, and incinerating carcasses.
1. True
2. False
17. Arboviral diseases may present which of the following clinical syndromes?
- a. acute CNS disease usually with encephalitis
 - b. acute benign fever
 - c. hemorrhagic fever
 - d. polyarthrititis and rash
1. a, b, and c
 2. b, c, and d
 3. a, b, and d
 4. a, b, c, and d
18. The major vector of arboviral diseases is the?
1. mosquito
 2. sandfly
 3. tick
 4. mite
19. What is the only known vector for the alphavirus?
1. Ticks
 2. Phlebotomine
 3. unknown
 4. Mosquitoes

In answering questions 20 through 23, refer to the following scenario:

Coincidental with a high culicine mosquito population in an Eastern U.S. town, an outbreak of a disease occurred with symptoms of high fever meningeal signs, stupor, and spasticity. The fatality rate was high.

20. What disease is most implicated?
 1. Oropouch virus
 2. Eastern equine encephalitis
 3. Japanese encephalitis
 4. Yellow fever
21. To which arboviral group does the infectious agent of the disease described above belong?
 1. Alphaviruses
 2. Bunyavirus, Group B
 3. Bunyavirus, Group C
 4. Rhabdovirus
22. What is the most common vector for the disease described above?
 1. Aedes triseriatus
 2. Culex tarsalis
 3. Culiseta melanura
 4. Culiseta nigripalpus
23. Control of the disease described above is best affected by?
 1. elimination of the mosquito vector
 2. immunization of all infants
 3. quarantine of infected persons
 4. removal of bird reservoirs
24. A clinical condition characteristically occurring in Russian spring-summer encephalitis is .
 1. a tendency to bleed
 2. flaccid paralysis of the shoulder girdle
 3. retro-orbital pains
 4. weakness of the lower limbs
25. What type of tick-borne virus that produces encephalitis in sheep is more prevalent in Scotland, northern England, and Ireland than another locations?
 1. Diphasic meningoencephalitis
 2. Louping ill
 3. Powassan
 4. Russian spring-summer encephalitis

26. The mode of transmission for Tick-Borne Arboviral Encephalitides is the bite of infective ticks and consumption of milk from infected animals.
1. True
 2. False
27. How is immunity to Central European encephalitis acquired?
1. as a result of an infection of the disease
 2. concomitantly with a smallpox vaccination
 3. from an inactivated tissue culture vaccine
 4. from TC-83 attenuated virus vaccine
28. Where is Mayaro fever most likely to be encountered?
1. Africa
 2. Asia
 3. Australia
 4. South America
29. What is the source of mosquito infection for West Nile fever?
1. birds
 2. horses
 3. rodents
 4. unknown
30. In which of the following will identification of the disease among sheep and other animals have epidemiological value by indicating the frequency of infection and areas involved?
1. Dengue fever
 2. Rift Valley fever
 3. West Nile fever
 4. Yellow fever
31. How many days is the usual incubation period for Colorado tick fever?
1. 3 to 4
 2. 4 to 5
 3. 5 to 6
 4. 6 to 7
32. Complete recovery from Vesicular Stomatitis Virus Disease may be preceded by .
1. Encephalitis
 2. prolonged mental depression
 3. hepatitis
 4. flaccid paralysis

33. A preventive measure used to control Papatasi fever is the destruction of .
1. flies
 2. mosquitoes
 3. sandflies
 4. swamps
34. Which hemorrhagic fever is endemic among animal workers of Eastern Europe, is transmitted by the Hyalomma tick, and has the hare as its reservoir?
1. Crimean-Congo hemorrhagic fever
 2. Kyasanur Forest disease
 3. Omsk hemorrhagic fever
 4. Russian spring-summer disease
35. For which of the following diseases would the diagnosis be made by identification on a thick and thin blood film of the parasite within red blood cells?
1. Aspergillosis
 2. Balantidiasis
 3. Babesiosis
 4. Bartonellosis
36. What malaria-like disease is endemic on Nantucket Island in the USA?
1. Babesiosis
 2. Canicola fever
 3. Listeriosis
 4. Quintana fever
37. Babesiosis is transmitted by the bite of .
1. adult ixodes scapularis ticks
 2. larval ixodes scapularis ticks
 3. nymphal ixodes ticks
38. Bilateral cranial nerve dysfunction is a characteristic finding of food poisoning caused by the toxin of?
1. Bacillus cereus
 2. Clostridian botulinum
 3. Staphylococcus aureus
 4. Vibrio parahemolyticus
39. Which is the most common form of botulism resulting from spore ingestion and subsequent outgrowth and in vivo toxin production in the intestine by the botulinum bacillus?
1. classic
 2. wound
 3. infant
 4. spore

40. The diagnosis of classic botulism is supported by the presence of the specific toxin in serum, stool, and incriminated food.

1. True
2. False

41. Classic botulism is caused by toxins produced in improperly processed, canned, low-acid or alkaline foods and pasteurized and lightly cured foods held without refrigeration.

1. True
2. False

For questions 42 through 45, match the source of botulism listed in column B with the population affected in column A.

- | A. Population affected | B. Source of Botulism |
|------------------------|-----------------------------------|
| 42. infants | 1. seal meat, smoked salmon |
| 43. Canadian | 2. seafood |
| 44. U.S. | 3. honey |
| 45. Japanese | 4. home canned vegetables, fruits |
46. Neurologic symptoms of classical botulism usually appear within how many hours?
1. 2-4
 2. 4-6
 3. 8-12
 4. 12-36
47. The World Health Organization classification for Botulism is which class?
1. 1
 2. 2A
 3. 3A
 4. 4
48. The acute enteric bacterial disease, caused by campylobacter jejuni, that is characterized by variable severity of diarrhea, abdominal pain, malaise, fever, nausea and vomiting lasting 2-5 days, is called?
1. Vibrio Cholera
 2. Gastritis
 3. Capillariasis
 4. Vibrionic enteritis

49. The percentage of diarrhea worldwide caused by the infectious agents of campylobacter enteritis is?
1. 1-5 %
 2. 5-14 %
 3. 10-15 %
 4. over 20 %
50. Common source outbreaks of *C. jejuni* are linked to undercooked chicken, unpasteurized milk, and ?
1. unchlorinated water
 2. raw fish
 3. honey
 4. improperly canned vegetables and fruits
51. Which of the following is the infectious agent for ulcus molle?
1. *Neisseria gonorrhoea*
 2. *Hemophilus ducreyi*
 3. *Treponema pallidum*
 4. *Chlamydia trachomatis*
52. A self-limited genital infection characterized by painful necrotizing ulceration is?
1. chancroid
 2. granuloma inguinale
 3. lymphogranuloma venereum
 4. syphilis
53. Because of its difficulty to culture, isolation of the infectious agent is NOT an acceptable method of diagnosis for chancroid.
1. True
 2. False
54. What is the mode of transmission for Chancroid?
1. bite
 2. direct contact
 3. ingestion
 4. inhalation
55. What is the incubation period for Ducrey's bacillus?
1. 3 to 5 days
 2. 7 to 10 days
 3. 10 to 14 days
 4. 14 to 30 days

56. In which of the following conditions is the skin rash histologically and etiologically the same as that found in shingles?
1. Chickenpox
 2. Monkeypox
 3. Rickettsialpox
 4. Smallpox
57. Herpes zoster is most frequent in which age group?
1. adolescents
 2. children
 3. older adults
 4. young adults
58. Under microscopic laboratory testing, the identification of multinucleated, giant epithelial cells is indicative of which of the following?
1. Rubella
 2. Rubeola
 3. Varicella
 4. Variola
59. Chickenpox is transmitted by respiratory secretions of infected people and by?
1. direct contact with vesicle fluid
 2. congenital infections
 3. articles freshly soiled with discharges or vesicle fluid
 4. all of the above
60. Patients with chickenpox are usually contagious 1-2 days before onset of rash and not more than days after appearance of first crop of vesicles?
1. 3
 2. 5
 3. 7
 4. 10
61. Nongonococcal urethritis (NGU) is a sexually transmitted disease diagnosed by the demonstration of N. chlamydia by smear or culture.
1. True
 2. False

62. Which of the following is an acute bacterial enteric disease with sudden onset, profuse painless watery stools, occasional vomiting, rapid dehydration, acidosis and circulatory collapse and death may occur within a few hours in severe untreated cases?
1. Chlamydial infection
 2. cholera
 3. Chancroid
 4. Chromomycosis
63. The mode of transmission for Cholera is ingestion of water contaminated with feces or vomitus of patients, feces of carriers, and ingestion of raw seafood.
1. True
 2. False
64. The incubation period for Cholera can be?
1. few minutes to 3 days
 2. few hours to 5 days
 3. 2-3 days
 4. 2-3 weeks
65. Which of the following preventive measures is the LEAST effective for controlling an epidemic of Cholera?
1. active immunization
 2. chlorinating or boiling all water used for cooking or drinking
 3. careful preparation of food
 4. sanitary disposal of human waste
66. What is the World Health Organization classification for Cholera?
1. Class 1
 2. Class 2
 3. Class 3
 4. Class 4
67. The main thrust of specific treatment for Cholera is?
1. hospitalization with strict isolation
 2. filter or boil drinking water supplies
 3. prompt fluid therapy to correct dehydration
 4. Gancyclovir 500mg 4 times a day
68. Clonorchiasis is?
1. an acute self limited disease
 2. easily transmitted person to person
 3. a significant risk factor for development of cholangiocarcinoma
 4. highly endemic in North America, Alaska and Canada

69. Prevention of Oriental liver fluke disease includes?
1. avoidance of undercooked seafood
 2. prohibit disposal of feces in fishponds
 3. eradication of snails
 4. drying or salting of exported fish
70. Coccidioidomycosis primary infections are extremely common in the of the western hemisphere.
1. mountain areas
 2. arid areas
 3. tropical areas
 4. arid and semiarid areas
71. What is the primary reservoir of *Coccidioides immitis*?
1. human beings
 2. soil
 3. water
 4. wild rodents
72. Coccidioidomycosis is most commonly contracted by .
1. arthropod inoculation
 2. contact with an infected person
 3. ingestion of the infectious agent
 4. inhalation of the infectious agent
73. Recovery from a primary infection of coccidioidomycosis is followed by .
1. a decreasing complement fixation titer
 2. immunity to the disease
 3. no reactivity to coccidioidin
 4. susceptibility to re-infection
74. Which measure is most important in the prevention of coccidioidomycosis in endemic areas?
1. immunization of possible contacts in endemic areas
 2. investigation of contacts
 3. planting of grass and other dust-control measures
 4. prophylaxis with broad-spectrum antibiotics

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ASSIGNMENT TWO

READING ASSIGNMENT: Control of Communicable Diseases Manual, 16th Edition, p.106 through p. 245.

1. Corynebacterium diphtheria is the infectious agent of what kind of conjunctivitis?
 1. acute bacterial
 2. Apolpo bacterial
 3. inclusion
 4. keratoconjunctivitis
2. Hand, foot and mouth disease is caused by?
 1. Vesicular stomatitis virus (VSV)
 2. Picornavirus Group A
 3. Cocksackievirus
 4. Herpes simplex virus
3. Herpangina is transmitted by?
 1. mosquitos
 2. direct contact with an infected person
 3. drinking water
 4. airborne spores
4. A myotic disease usually presenting as subacute or chronic meningitis is?
 1. actinomycosis
 2. coccidioidomycosis
 3. histoplasmosis
 4. cryptococcosis
5. Cryptococcosis presumably is related to the inhalation of spore-laden dust. A proven source of saprophytic growth of the causative organism is?
 1. cattle feed lots
 2. dog runs
 3. pigeon roosts
 4. rodent burrows
6. Cryptosporidiosis is a parasitic infection which affects man and other vertebrates with the major symptom being , preceded by anorexia and vomiting in children.
 1. fever
 2. swelling
 3. diarrhea
 4. vomiting

In answering questions 7 and 8, refer to the following scenario:

A sudden outbreak of febrile disease among a company of marines on duty in Southeast Asia is characterized by intense headaches, retro-orbital pain, joint and muscle pains, and rash. Recovery in 5 to 7 days is uneventful except for prolonged fatigue and depression.

7. The above symptoms characterize:
 1. Dengue fever
 2. Kyasanur Forest disease
 3. Rheumatic fever
 4. Rift Valley fever
8. What preventive measures are employed to control the spread of the disease with the above symptoms?
 1. elimination of the mosquito vector
 2. elimination of the tick vector
 3. immunization of contacts
 4. quarantine of infected persons
9. The viruses of dengue fever include?
 1. human herpes virus 5
 2. ETEC
 3. serotype types 1,2,3,4
 4. HDV
10. In tropical Asia, symptoms such as cool, blotchy skin, circumoral cyanosis, and extremely narrow pulse pressure or hypotension are highly indicative of?
 1. Changuinola fever
 2. Dengue shock syndrome
 3. Omsk hemorrhagic fever
 4. O'nyong-nyong
11. Outbreaks of E. Coli diarrhea have been linked to all of the following EXCEPT?
 1. hamburger
 2. raw milk
 3. apple cider
 4. chicken
12. Traveler's diarrhea is most commonly caused by?
 1. E. coli
 2. E. histolytica
 3. Giardia lamblia
 4. Salmonella

13. Enterotoxigenic strains of Escherichia Coli typically produce symptoms similar to those of?
1. amebiasis
 2. botulism
 3. cholera
 4. typhus
14. In addition to electrolyte fluid therapy to prevent or treat dehydration, the specific treatment for diarrhea caused by enterotoxigenic strains may include?
1. oral ciprofloxacin (500mg) 2x daily, 5 days
 2. TMP-SMX (160-800mg) 2x daily, 5 days
 3. doxycycline (100mg) 1x daily, 5 days
 4. all of the above
15. Diphtheria should be suspected in the differential diagnosis of?
1. undulant fever, typhoid fever, melioidosis
 2. Wuchereriasis, onchocerciasis
 3. Candidiasis, syphilis, infectious mononucleosis
 4. Shigellosis, balantidiosis, giardiosis
16. Which of the following pharmaceutical products is used to prevent diphtheria?
1. appropriate toxoid
 2. freeze-dried vaccine of killed virus
 3. live attenuated virus vaccine
 4. suspension vaccine of killed bacteria
17. All close contacts of diphtheria patients should have cultures taken and be kept under surveillance for seven (7)?
1. hours
 2. days
 3. weeks
 4. months
18. A complication of infection by fish tapeworm may be?
1. B-12 deficiency anemia
 2. cirrhosis of the liver
 3. diverticulitis
 4. polycythemia
19. Diphyllbothriasis is transmitted by?
1. direct transmission from person to person
 2. consumption of raw or inadequately cooked fish
 3. consumption of raw or smoked bear meat
 4. drinking copepods in water

20. In the USA, the consumption of raw or incompletely cooked fish, such as pike or perch, may result in infection with?
1. *Diphyllobothrium latum*
 2. *Fasciolopsis buski*
 3. *Dracunculus medinensis*
 4. *Clonorchis sinensis*
21. A key aspect of dracontiasis control involves filtration of drinking water to remove?
1. copepods
 2. eggs
 3. larvae
 4. snails
22. This severe acute viral disease was first recognized in 1976, in the western equatorial province of the Sudan.
1. Dermatophytosis
 2. Hantavirus
 3. Hepatitis C
 4. Ebola-Marburg Virus
23. The mode of transmission for the above disease is?
1. inhalation of airborne particles
 2. direct contact with infected blood, semen, secretions and contaminated needles and syringes.
 3. unknown
 4. ingestion of inadequately disinfected water
24. The organism that is responsible for Echinococcosis is?
1. bacterial
 2. fungal
 3. parasitic
 4. viral
25. *Echinococcus granulosus* is common?
1. worldwide and affects all
 2. in developing countries
 3. where dogs are used to herd grazing animals and also have intimate contact with people
 4. waterborne epidemics
26. The occurrence of echinococcosis, especially among children, is most often the result of contact with?
1. dogs
 2. horses
 3. pigeons
 4. sheep

27. Several species of day-biting mosquitos transmit which of the following nematoid diseases in Southeast Asia?
1. Falciparum malaria
 2. Filariasis
 3. Loiasis
 4. Vivax malaria
28. Staphylococcal food poisoning is an of abrupt and sometimes violent onset, with severe nausea, cramps, vomiting, and prostration, often accompanied by diarrhea and sometimes with subnormal temperature and lowered blood pressure.
1. infection
 2. intoxication
29. Illness from staphylococcal food poisoning usually lasts how many days?
1. 1 to 2
 2. 3 to 5
 3. 7 to 10
 4. 10-12
30. Man is the usual reservoir for which food poisoning agent(s)?
1. Bacillus cereus
 2. Clostridium botulinum
 3. Staphylococcal enterotoxins
 4. Streptococcal endotoxins
31. Staphylococcal food poisoning is transmitted by all of the following EXCEPT:
1. foods coming in contact with foodhandler's hand without subsequent cooking
 2. food with inadequate heating
 3. food with inadequate refrigeration
 4. fumes from charcoal grilling
32. The timeframe between eating food and the onset of symptoms of staphylococcal food poisoning can be .
1. immediate to 10 hours
 2. 30 minutes to 8 hours
 3. 1 to 24 hours
 4. 24 to 36 hours
33. The most effective measure in preventing outbreaks of Vibrio parahaemolyticus poisoning is to .
1. avoid eating seafood during the warm season
 2. cook seafood at a temperature of 100 degrees F. for at least 10 minutes
 3. handle and store all raw or cooked seafood in the same environment
 4. keep all seafood, raw or cooked, adequately refrigerated

34. *Bacillus Cereus* food poisoning is an intoxication that is characterized by nausea and vomiting that has been most commonly associated with which food held at room temperature before reheating?
1. roasted chicken
 2. cooked rice
 3. whipped cream
 4. stewed tomatoes
35. Which type of food poisoning is not commonly reported in the United States?
1. *Bacillus cereus*
 2. botulism
 3. *Clostridium perfringens*
 4. staphylococcal
36. What retrovirus-caused disease, manifested by dominant gastrointestinal symptoms, principally affects young children?
1. epidemic viral gastroenteritis
 2. sporadic viral gastroenteritis
 3. viral diarrhea
 4. winter vomiting disease
37. Epidemic viral gastroenteritis has an incubation period of how many days?
1. 1 to 2
 2. 3 to 5
 3. 5 to 7
 4. 7 to 14
38. The occurrence of pale, greasy, or malodorous stools is a strong indication of which of the following parasitic diseases?
1. Amebiasis
 2. Balantidiasis
 3. Enterobiasis
 4. Giardiasis
39. What disease occurs in the USA most often in mountain communities and those that derive drinking water from streams or rivers without a water filtration system?
1. epidemic viral gastroenteropathy
 2. Giardiasis
 3. Rotaviral enteritis
 4. *clostridium perfringens*
40. The most reliable preventive measure against Giardiasis is?
1. drink bottle water only
 2. boil emergency water supplies
 3. chemically treat water with hypochlorite or iodine
 4. drink only cold water

41. Cervicitis and salpingitis are inflammatory conditions that often accompany which venereal disease?
1. Chancroid
 2. Gonorrhea
 3. Granuloma inguinale
 4. Syphilis
42. Which disease has *Neisseria gonorrhoea* as its infectious agent?
1. Clap
 2. Lues
 3. Ulcus Molle
 4. Lymphogranuloma venereum
43. Recognition of a gonococcal infection of the genitourinary tract in males is a purulent discharge from the anterior urethra with dysuria which appears days after an infecting exposure.
1. 1-3
 2. 2-7
 3. 3-8
 4. 7-10
44. A positive result on which of the following tests confirms a diagnosis of gonorrhea?
1. direct wet-film preparation
 2. fluorescent anti-body stained smear
 3. modified Thayer-Martin media culture
 4. VDRL flocculation serology
45. Since effective therapy can end communicability within hours, personnel treated for gonorrhea NEED NOT abstain from sexual activity until antimicrobial therapy is completed.
1. true
 2. false
46. Until proven otherwise, any purulent inflammations of the conjunctiva in the newborn should be considered an infection by .
1. *Chlamydia trachomatis*
 2. *Haemophilus Aegyptius*
 3. *Neisseria gonorrhoea*
 4. *Pseudomonas aeruginosa*
47. What is the preferred prophylactic agent used to prevent gonococcal ophthalmia in the newborn?
1. ophthalmic penicillin ointment, 100,000 units/gram
 2. 5% silver nitrate solution
 3. 1% silver nitrate solution
 4. 0.9% sodium chloride solution

48. Which of the following statements about granuloma inguinale is TRUE?
1. It is a highly communicable disease of the external genitalia.
 2. It is a painful, often suppurative disease of the skin and mucous membranes.
 3. It is common in prostitutes and heterosexual partners.
 4. If neglected, may result in extensive destruction of genital organs.
49. Donovanosis is caused by?
1. Haemophilus ducreyi
 2. Donovan virus
 3. calymmatobacterium granulomatis
 4. an unknown retrovirus
50. What hemorrhagic fever was very troublesome among United Nations troops in Korea in the 1950s?
1. Crimean
 2. Dengue
 3. Epidemic
 4. Omsk
51. This acute viral disease was first recognized in the spring and summer of 1993 in New Mexico and Arizona.
1. Hantavirus pulmonary syndrome
 2. Epidemic Hemorrhagic fever
 3. Ebola-Marburg virus
 4. Puumala virus syndrome
52. A potentially debilitating viral disease, characterized by malaise, fever, anorexia, nausea and abdominal discomfort, and jaundice, that can be the source for severe problems in day care centers is .
1. hepatitis C
 2. infectious hepatitis
 3. serum hepatitis
 4. West Nile fever
53. In countries where environmental sanitation is poor, Viral Hepatitis A infection is common and occurs at an early age with an average incubation period of days.
1. 15-50
 2. 20-45
 3. 28-30
 4. 30-60
54. What preventive measure can be used to control the Viral Hepatitis A disease?
1. active immunization of contacts
 2. prophylactic sulfonamide therapy
 3. quarantine
 4. sanitary disposal of human wastes

55. For travelers, who will experience prolonged exposure to viral hepatitis A, which of the following prophylactic regimens is initially prescribed?
1. 0.02 ml/Kg
 2. 0.04 ml/Kg
 3. 0.06 ml/Kg
 4. 0.08 ml/Kg
56. Second only to tobacco among human carcinogens, which strain of hepatitis may cause up to 80% of all cases of hepatocellular carcinoma worldwide?
1. HAV
 2. HBV
 3. HCV
 4. HDV
57. Diagnosis of viral hepatitis B is usually confirmed by .
1. demonstration of IgM antibodies against HAV
 2. demonstration of HBsAg
 3. exclusion of hepatitis A,B, and delta viruses
 4. RIA or ELISA
58. Although 0.5% of the adult USA population has ABsAg positive, in some areas of Asia, the overall antigen carrier rates may be .
1. 1-5%
 2. 5-10%
 3. 10-15%
 4. 15-20%
59. Viral hepatitis B may be transmitted in all the following ways EXCEPT:
1. between household contacts
 2. between sexual partners
 3. sharing razors and toothbrushes
 4. fecal-oral
60. The average incubation period for type B hepatitis is .
1. 2 weeks
 2. 45-180 days
 3. 60-90 days
 4. 6-9 months
61. Serum hepatitis is infectious .
1. prior to the appearance of symptoms
 2. during the acute clinical stage
 3. during the chronic carrier stage
 4. during all the above phases

62. There _____ types of inactivated vaccines against HB that have been licensed and are commercially available.

1. 1
2. 2
3. 4
4. 6

63. Blood banks should employ all EXCEPT which of the following procedures to control serum hepatitis?

1. maintain a surveillance system for post-transfusion hepatitis
2. preferentially use professional blood donors
3. screen blood or donors for hepatitis B antigen or antibody
4. use disposable equipment whenever possible

64. This disease is always associated with a coexistent hepatitis B virus infection .

1. A
2. B
3. C
4. D

65. It is _____ that IG prepared from the serum of donors in the USA or Europe will protect against Hepatitis E.

1. unlikely
2. likely

In answering questions 66 - 69, refer to the following scenario:

A group of Australian guano workers simultaneously begin complaining of weakness, general malaise, fever, chest pain, and cough.

66. Which of the following is a mycotic disease that is suspected of being the cause of the delineated symptoms?

1. Blastomycosis
2. Histoplasmosis
3. Nocardiosis
4. Tuberculosis

67. Which clinical form of the above disease is detectable only by acquired hypersensitivity to histoplasmin?

1. asymptomatic
2. North American
3. pulmonary
4. systemic

68. What is the reservoir for the infectious agent of histoplasmosis?
1. diseased cattle
 2. highly organic soil
 3. inorganic soil
 4. insect eating bats
69. In what portions of the USA is histoplasmin hypersensitivity prevalent?
1. north and east
 2. south and west
 3. east and central
 4. west and central
70. All of the following are results of a heavy infection of hookworm EXCEPT:
1. hepatosplenomegaly
 2. hypochromic microcytic anemia
 3. hypoproteinemia
 4. retarded mental/physical development
71. Which is the only human tapeworm without an obligatory intermediate host.
1. *H. diminuta*
 2. Dwarf tapeworm
 3. *Dipylidium caninum*
 4. *Diphyllobothrium latum*

CONTROL OF COMMUNICABLE DISEASES
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ASSIGNMENT THREE

READING ASSIGNMENT: CONTROL OF COMMUNICABLE DISEASES MANUAL,
16TH EDITION, PAGES 245 THROUGH 369.

1. Which of the following is an acute infectious viral disease of the respiratory tract, which is usually self-limited?
 1. coccidioidomycosis
 2. influenza
 3. psittacosis
 4. prargonimiasis
2. Which of the following may be a serious complication of influenza?
 1. bacterial pneumonia
 2. hepatitis
 3. meningitis
 4. reye syndrome
3. Of the three (3) types of influenza virus that are recognized, which type includes three subtypes?
 1. A
 2. B
 3. C
 4. all of the above
4. The clinical attack rates during epidemics of influenza are higher in?
 1. general community
 2. local schools
 3. boarding schools or nursing homes
 4. day care centers
5. When a new subtype of influenza appears, all are susceptible _____ those who lived through earlier epidemics caused by a related subtype.
 1. except
 2. including

6. Active immunization with available killed virus vaccines may give _____% protection against influenza infection in healthy young adults when the vaccine antigen closely matches the prevailing wild strain of virus.

1. 10-30%
2. 30-50%
3. 50-60%
4. 70-80%

7. Because it is a disease under surveillance by WHO, influenza is classified .

1. Class I
2. Class IA
3. Class IB
4. Class II

8. An acute febrile syndrome of early childhood characterized by a high spiking fever unresponsive to antibiotics with pronounced irritability and mood change, swollen glands with no sign of pus, red eyes, red tongue, dry red lips, red and flaky skin, describes which of the following diseases?

1. Keratoconjunctivitis
2. Lassa fever
3. Leishmaniasis
4. Kawasaki syndrome

9. The source of Legionnaire's Disease is primarily in .

1. soil disturbances
2. soil excavation
3. sources of water and moisture
4. vegetation

10. Which of the following people would be MOST susceptible to Legionnaire pneumonia?

1. 55 year old, male, smoker
2. 17 year old female with scoliosis
3. 20 year healthy male
4. 49 year female with severe sinus problems

11. Which of the following flagellated protozoa is the infectious agent for Delhi boil in the Old World?

1. L. chagasi
2. L. donovani
3. L. minuta
4. L. tropica

12. The incubation period for Aleppo Evil can be a week to many months. If untreated it can be infectious for?
1. as long as parasites remain in lesions
 2. for life
 3. not longer than a year
 4. remains infectious until treated
13. Some members of a group of marines on training maneuvers in a forested area of Central America developed skin lesions diagnosed as cutaneous leishmaniasis. Which of the following control measures would be feasible in this situation?
1. destruction of animal reservoirs
 2. insecticide spraying of the immediately surrounding jungle area
 3. frequent hosing down of portable shower areas
 4. use of insect repellents and protective clothing
14. A chronic systemic disease that multiplies in visceral organs characterized by fever, enlarged spleen and lymph nodes, progressive weight loss and weakness, and anemia is:
1. Hansen's disease
 2. Kala-azar
 3. Lassa fever
 4. Pontiac fever
15. Kala-azar is produced by a flagellated protozoal organism known as:
1. *L. braziliensis*
 2. *L. donovani*
 3. *L. mexicana*
 4. *L. amazoniasis*
16. Antimalarial insecticides can be used to modify the incidence of visceral leishmaniasis.
1. true
 2. false
17. The reservoir and vector of visceral leishmaniasis are thought to be infected:
1. cattle and *Chrysops*
 2. dogs and *Simulium*
 3. gerbils and *Glossina*
 4. humans and *Phlebotomus*
18. Laboratory demonstration of acid-fast bacilli in suspected cutaneous lesions supports a diagnosis of:
1. impetigo
 2. leprosy
 3. leishmaniasis
 4. rickettsialpox

19. The recommended treatment for new cases of the above disease is the administration of:
1. dapsone only
 2. rifampin only
 3. dapsone/rifampin together
 4. dapsone/rifampin/clofazimine
20. Which of the following is NOT characterized as a bacterial disease with common features of fever, headache, chills, severe myalgia of calves and thighs, and conjunctival suffusion?
1. Weil disease
 2. Delhi Bail
 3. Mud fever
 4. Swineherd's disease
21. The most common source of infection by *Leptospira* is thought to be water contaminated with:
1. pharyngeal secretions of infected person
 2. skin of infected animals
 3. urine of infected animals
 4. skin of infected persons
22. Hemorrhagic jaundice may be transmitted to man through direct contact with the urine of infected pet animals.
1. true
 2. false
23. Neonatal listeriosis is an infection transmitted from mother to unborn infant in utero or during its passage through the birth canal.
1. true
 2. false
24. A chronic filarial disease characterized by migration of the adult worm through subcutaneous or deeper tissues of the body with transient swellings several centimeters in diameter is:
1. Lyme Disease
 2. Listeriosis
 3. Loa Loa infection
 4. Leptospirosis
25. Loiasis needs to be differentiated from:
1. undulant fever, typhoid fever, melioidosis
 2. Wuchereriasis, onchoncerciosis
 3. Candidiasis, syphilis, infectious mononucleosis
 4. shigellosis, balantidiosis, giardiosis

26. Which of the following abnormalities is NOT a known outcome of EM lesions occurring after contraction of Lyme's Disease?
1. cardiac abnormalities
 2. skin discoloration
 3. chronic arthritis
 4. neurologic abnormalities
27. Which regional area of the USA has there NOT been an endemic foci of Lyme's Disease?
1. upper Midwest (Wisconsin and Minnesota)
 2. Western states of California and Oregon
 3. Atlantic coast from Massachusetts to Georgia
 4. Southwestern states - Texas and Oklahoma
28. Lyme Disease is contracted by:
1. inhalation
 2. ingestion
 3. direct contact
 4. bite
29. What arenaviral disease of animals is transmissible to man through infected pet hamsters?
1. hydrophobia
 2. lymphocytic choriomeningitis
 3. rat-bite fever
 4. viral meningitis
30. Laboratory diagnosis of lymphogranuloma venereum is made by:
1. bubo aspirate culture
 2. direct wet film preparation
 3. hemagglutination serology testing
 4. negative Frei antigen skin test
31. Chlamydia trachomatis is the infectious agent for which of the following disease?
1. Clap
 2. Lues
 3. Ulcus molle
 4. Lymphogranuloma venereum
32. The fever pattern of the first few days of malaria infection resembles that seen in early stages of which other illnesses?
1. bacterial
 2. viral
 3. parasitic
 4. all of the above

33. If a person recently returning from a tropical area develops CNS symptoms or lapses into a coma, what may be the cause?
1. LGV
 2. LCM
 3. Lyme borreliosis
 4. Malaria
34. The demonstration of malarial antibodies is not considered a diagnostic tool because:
1. they could just indicate prior disease or exposure
 2. they don't appear until one month after exposure
 3. they don't appear until one month after symptoms appear
 4. no such antibodies exist
35. With which malarial agent should you NOT use the 4-aminoquinolines?
1. *P. falciparum*
 2. *P. malariae*
 3. *P. ovale*
 4. *P. vivax*
36. At what time of day would a person be most likely to be bit by an infective female anopheline mosquito?
1. dusk and early evening
 2. early morning
 3. noon
 4. early afternoon
37. Malaria may be transmitted by the bite of an infected female mosquito as well as by:
1. use of contaminated hypodermic syringes
 2. ingestion of contaminated water
 3. ingestion of raw fish
 4. contact with an infected person
38. Which of the following is NOT a preventive measure for control of Malaria?
1. install screens
 2. use bed nets
 3. repeated application of insect repellent
 4. spray screened living and sleeping quarters each morning
39. People who have been on antimalarial prophylaxis may be accepted as blood donors one year after cessation of chemoprophylaxis.
1. true
 2. false

40. Which antimalarial drug should tourists traveling through Asia or Africa use?
1. Chloroquine phosphate
 2. mefloquine
 3. quinine dihydrochloride
 4. Primaquine
41. A malarial patient is leaving an epidemic area and suppressive drugs are to be discontinued. Which of the following drugs should be administered to prevent a relapse of *P. vivax* infection?
1. Amodiaquine hydrochloride
 2. Chloroquine phosphate
 3. Primaquine phosphate
 4. Quinacrine hydrochloride
42. Which measures are useful in preventing the spread of malaria between countries?
- a. administration of antimalarial drugs to potentially infected migrants, refugees, seasonal workers
 - b. disinsectization of aircraft and ships before departure from malarious areas
 - c. disinsectionization of aircraft and ships on arrival in malaria-free areas
 - d. rigid mosquito control within flight range of airports and harbors
1. a,b,d
 2. a,b
 3. b,c
 4. all of the above
43. Koplik's spots on the buccal mucous membranes are a sign of:
1. chickenpox
 2. herpangina
 3. rubella
 4. rubeola
44. Measles is a more severe disease in the very young and in malnourished children with a case fatality rate of in developing countries.
1. 1 - 3%
 2. 4 - 7%
 3. 5 - 10%
 4. 10 - 30%
45. Morbillivirus is the infectious agent for:
1. infectious parotitis
 2. glandular fever
 3. hard measles
 4. german measles

46. Which of the following pharmaceutical products is intended to prevent Rubeola?
1. appropriate toxoid
 2. freeze dried vaccine of killed virus
 3. live attenuated virus vaccine
 4. suspension vaccine of killed bacteria
47. For which of the following populations is live measles vaccine contraindicated?
1. children with HIV or Aids
 2. children receiving chemotherapy for neoplasms
 3. institutionalized children
 4. malnourished children in developing countries
48. Petechial or rubella-like rashes are commonly found on persons having aseptic meningitis.
1. true
 2. false
49. A common, usually nonfatal, clinical syndrome with multiple viral etiologies in which about half of the cases have no demonstrable agent is:
1. aseptic meningitis
 2. herpes simplex
 3. infectious mononucleosis
 4. infectious parotitis
50. In the USA, viral meningitis is most commonly caused by:
1. adenoviruses
 2. coxsackieviruses
 3. enteroviruses
 4. myxoviruses
51. Patients suffering from meningococcal pneumonia may have joint involvement in association with petechial rash.
1. true
 2. false
52. In an epidemic situation, patients were found to have inflammation of the brain and spinal cord membranes in addition to fever, nausea, vomiting, and a petechial rash. The causative agent was found to be a gram-negative coccus. Which of the following organisms would be implicated in this epidemic?
1. *Neisseria meningitidis*
 2. *Proteus mirabilis*
 3. *Pseudomonas aeruginosa*
 4. *Staphylococcus aureus*

53. In the United States, which serogroup(s) of the above disease causing organism has/have been responsible for major epidemics?

1. A
2. A and C
3. B and C
4. X,Y, and Z

54. For preventive measures of meningococcal meningitis, the only licensed vaccine in the USA contains group .

1. A
2. C
3. Y
4. A,C,Y, and W-135 meningococcal polysaccharides

55. Susceptibility to meningococcal meningitis is low and decreases with age. There is a ratio of carriers to actual cases.

1. high
2. low
3. equal
4. unknown

56. The drug of choice for individuals infected with this organism is

1. chloromycetin
2. penicillin
3. rifampin
4. sulfadiazine

57. Molluscum contagiosum is a viral disease which results from contact with infective seafood.

1. true
2. false

58. Acute syndrome characterized by sore throat, lymphadenopathy, and abnormal liver function tests is:

1. infectious parotitis
2. glandular fever
3. rubella
4. rubeola

59. The viral disease characterized by: Heterophile laboratory studies that resemble those found in cases of herpes and toxoplasmosis:

1. infectious parotitis
2. infectious mononucleosis
3. rubella
4. rubeola

60. The Epstein-Barr virus is responsible for which of the following conditions frequently occurring among adolescents and young adults?
1. Herpes simplex
 2. infectious mononucleosis
 3. Marburg virus disease
 4. Molluscum contagiosum
61. Infectious mononucleosis can be transmitted through blood transfusions. 1. true
2. false
62. Which of the following salivary glands is most frequently involved in mumps?
1. maxillary
 2. parotid
 3. submandibular
 4. sublingual
63. Orchitis is a relatively frequent complication in male patients who are past puberty and have contracted .
1. infectious mononucleosis
 2. infectious parotitis
 3. lymphogranuloma venereum
 4. molluscum contagiosum
64. Oophoritis is common sequelae in about 5% of females affected with after puberty.
1. rubella
 2. mumps
 3. chickenpox
 4. measles
65. Infectious parotitis is caused by which organism type?
1. bacterial
 2. fungal
 3. parasitic
 4. viral
66. An acute viral disease characterized by paroxysms of severe pain localized in the chest or abdomen which may worsen with movement is:
1. infectious mononucleosis
 2. Bornholm disease
 3. infectious parotitis
 4. Maduromycosis

67. A clinical syndrome characterized by swelling and suppuration of subcutaneous tissues, formation of sinus tracts with visible granules in the pus, and lesions more than likely on the foot or lower leg, is:
1. malignant neoplasia
 2. Madura foot
 3. HCC
 4. Burkitt's lymphoma
68. "Hanging groin" is due to the loss of skin elasticity in river blindness disease.
1. true
 2. false
69. If the microfilaria of onchocerciasis invade the eye, a relatively frequent complication is .
1. blindness
 2. parasitic conjunctivitis
 3. parasitic glaucoma
 4. paratrachoma
70. Which of the following flies are responsible for transmitting onchocerciasis?
1. black
 2. mangrove
 3. phlebotomine
 4. tsetse
71. Which parts of the body are most frequently affected by the trematode disease paragonimiasis?
1. head and neck
 2. kidneys
 3. lungs
 4. teeth and gums
72. Pulmonary distomiasis is transmitted by:
1. bite of infected female blackfly
 2. raw or partially cooked freshwater crabs/crayfish
 3. inhalation of contaminated dust
 4. direct contact with mucous membranes of infected animals
73. Epidemic control measures for lung fluke disease consist of all of the following EXCEPT:
1. education of natives in environmental sanitation
 2. examination of local waters for infected snails
 3. instruction in proper preparation of possibly infected food
 4. mass treatment with piperazine

74. In endemic areas, which parasitic disease requires examination of snails and crustacea of fresh local waters when there have been clustered or sporadic infections in humans?
1. diphyllbothriasis
 2. dracontiasis
 3. fasciolopsiasis
 4. paragonimiasis
75. In recent years in the U.S., pertussis has been noticed with ____frequency.
1. increasing
 2. decreasing
 3. unchanging
76. Bubonic plague most often involves the ____lymphnodes.
1. axillary
 2. cervical
 3. inguinal
 4. popliteal
77. In the United States, plague is endemic in?
1. Wild rodents in the southern states
 2. Feral cats in the western states
 3. Wild rodents in the western states
 4. Humans in the south eastern states
78. This pneumonia is characterized by a staccato cough.
1. Pneumococcal
 2. Mycoplasmal
 3. Pneumocystitis
 4. Chlamydial
79. Infection with HIV is a predominate risk factor for this form of pneumonia.
1. Chlamydial
 2. Mycoplasmal
 3. Pneumocystitis
 4. Pneumococcal
80. The following persons are NOT candidates for receipt of pneumococcal vaccine.
1. HIV infected individuals
 2. Premature infants
 3. Individuals over 65 years of age
 4. A 45 year old man with congestive heart failure

81. Specific treatment for Mycoplasmal Pneumonia includes?
1. Penicillin
 2. Tetracycline
 3. TMP-SMX
 4. There is no treatment

CONTROL OF COMMUNICABLE DISEASES
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ASSIGNMENT FOUR

READING ASSIGNMENT: Control of Communicable Diseases Manual, 16th Edition, pages 345 through 529.

1. What parasitic agent is responsible for outbreaks of head lice among school children?
 1. *Pediculus humanus capitis*
 2. *Pediculus humanus corporis*
 3. *Phthirus capitis*
 4. *Phthirus pubis*
2. What treatment is used for pediculosis infestations in young children and pregnant women?
 1. Kwell
 2. 1% lindane
 3. 1% permethrin
 4. 5% malathion
3. An infectious disease of the skin demonstrating linear, burrow-type lesions around the finger webs, anterior surfaces of wrists, belt line is caused by the infectious agent?
 1. *Rickettsia tsutsugamushi*
 2. *Sarcoptes scabiei*
 3. *Schistosoma mansoni*
 4. *Phthirus corporis*
4. Scabies is usually transmitted by?
 1. Commercial laundries
 2. Swimming pools
 3. Skin-to-skin contact
 4. Contaminated fomites
5. What is the incidence of inapparent or subclinical infection in poliomyelitis?
 1. 90% are inapparent
 2. 90% are clinical
 3. Half as high for clinical cases
 4. 1% are inapparent

6. The greatest risk of this disease now occurs in the Indian sub-continent and war torn countries where health infrastructures have been destroyed.
1. Small pox
 2. Poliomyelitis
 3. Undulant fever
 4. Viral meningitis
7. Which statement about poliovirus vaccines is NOT true?
1. Booster doses are usually indicated before travel to high-risk areas.
 2. Formalin-inactivated poliovirus vaccine provides protection but is less effective in preventing alimentary tract infections.
 3. Oral attenuated polio virus vaccines are preferred.
 4. Poliovirus vaccines should not be used routinely because of the threat of vaccine-associated poliomyelitis.

* In answering questions 8 and 9, refer to the following scenario:

A pigeon fancier contracted an acute generalized infectious disease with onset of fever, headache, and early pneumonic involvement, but no cough initially. Later some coughing developed with a slight production of mucopurulent sputum.

8. Which of the diagnoses listed below would be MOST likely for the above case?
1. Blastomycosis
 2. Psittacosis
 3. Cryptococcosis
 4. Q fever
9. The agent causing the preceding symptoms responds to antibiotic therapy with?
1. Penicillin
 2. Streptomycin
 3. Sulfadiazine
 4. Tetracycline
10. The infectious agent for Q fever is?
1. C. Burneti
 2. C. Abori
 3. C. Rickettsii
 4. C. Tsutsugamushi
11. Which of the following preventive measures is used to control Q fever?
1. Immunization of close contacts
 2. Quarantine
 3. Isolation of infected persons
 4. Pasteurization of milk

12. Indefinite sensory changes at the site of an animal bite are characteristic findings in an acute encephalomyelitis sometimes referred to as?
1. Hydrophobia
 2. Parrot fever
 3. Q fever
 4. Rat-bite fever
13. The most effective method of rabies prevention is?
1. DEV
 2. HDVC
 3. RIG
 4. Soap and water
14. The development of a maculopapular rash and polyarthrits following a history of a rat bite is indicative of _____ fever.
1. Haverhill
 2. Scarlet
 3. Wolhynian
 4. Relapsing
15. A disease caused by a spirochete and characterized by alternate febrile and afebrile periods is _____ fever.
1. Puerperal
 2. Typhoid
 3. Relapsing
 4. Rheumatic
16. The inoculation of man by infected feces of *Pediculus humanus* is the mode of transmission of which rickettsial disease?
1. Murine typhus
 2. Scrub typhus
 3. Relapsing fever
 4. Wolhynian fever
17. The major known causes of acute catarrhal infections of the upper respiratory tract (commonly known as colds) are the
1. adenoviruses
 2. coxsackieviruses
 3. echoviruses
 4. rhinoviruses

18. Which preventive measure has proved successful in controlling acute viral respiratory disease among military recruits?
1. fumigation
 2. isolation
 3. quarantine
 4. vaccination
19. A specific treatment for Rocky Mountain spotted fever is ?
1. chloramphenicol
 2. penicillin
 3. streptomycin
 4. bacitracin
20. A small ulcer with a black center and a red border is the pathognomonic lesion of?
1. boutonneuse fever
 2. Q fever
 3. rickettsial pox
 4. typhus fever
21. Which of the following preventive measures is used to control or prevent tick-borne typhus fever?
1. quarantine of contacts
 2. education in personal protection
 3. immunization of contacts
 4. isolation of suspected contacts
22. Transmission of Rocky Mountain spotted fever by the bite of an infected tick usually requires attachment of the tick to humans for a period of?
1. less than 1 hour
 2. 2 to 3 hours
 3. 4 to 6 hours
 4. more than 24 hours
23. Where do most cases of Rocky Mountain spotted fever occur?
1. Panama
 2. southeastern USA
 3. Rocky Mountain region of the western USA
 4. Western Canada
24. The prototype disease of the spotted fever group is?
1. Boutonneuse fever
 2. Colorado tick fever
 3. Rocky Mountain spotted fever
 4. 3-day fever

24. What tick transmits the diseases of the spotted fever group?
1. Argasid
 2. Ixodid
 3. Soft ticks
 4. Prowazekii
26. What febrile rickettsial disease occurs principally among residents of apartment houses where the reservoir is plentiful?
1. Indian tick typhus
 2. Queensland tick typhus
 3. Rickettsialpox
 4. Siberian tick typhus
27. The reservoir for rickettsialpox is?
1. *Mus musculus*
 2. *Mus domesticus*
 3. *Rattus norvegicus*
 4. *Rattus rattus*

In answering questions 28-33, select from Column B the rickettsial disease characterized by the statements listed in Column A.

Column A

Column B

- | | |
|---|---------------------------------|
| 28. Recovery of the infectious agent from blood of patients is diagnostic but hazardous to laboratory workers. | 1. Epidemic typhus fever |
| 29. A maculopapular rash, appearing on the extremities, includes the palms and soles and spreads to most of the body. | 2. Q fever |
| 30. A disseminated vesicular rash occurs a few days after a fever and is seldom found on the palms and soles. It is easily confused with Varicella. | 3. Rickettsialpox |
| 31. Residual insecticide application to all contacts in a community is the most important measure for rapid control in widespread epidemics. | 4. Rocky Mountain Spotted Fever |
| 32. It occurs in colder areas where people may live under unhygienic conditions. | |

33. Where endemic, this disease mainly affects veterinarians, farmers and meat workers.
34. Which communicable disease contracted during pregnancy contributes to a significant number of neonatal congenital defects?
1. glandular fever
 2. infectious parotitis
 3. rubella
 4. rubeola
35. A mild febrile infectious disease with a rash resembling that of scarlet fever is ?
1. infectious parotitis
 2. Varicella
 3. Rubella
 4. Rubeola
36. Which of the following diseases will present symptomatically as acute diarrhea?
1. Brucellosis
 2. Kala-azar
 3. Salmonellosis
 4. Exanthem subitum
37. The most frequent nursery-acquired staphylococcal disease of the newborn is?
1. erysipelas
 2. impetigo neonatorum
 3. pyoderma neonatorum
 4. Ritter's disease
38. The occurrence of two or more concurrent cases of pustulosis related to a hospital nursery is presumptive evidence of an epidemic of?
1. candidiasis
 2. varicella
 3. impetigo
 4. erysipelas
39. An attack of rheumatic fever is usually precipitated by which of the following conditions?
1. Infectious mononucleosis
 2. Staphylococcal pneumonia
 3. Streptococcal infection
 4. Viral pharyngitis

40. Which drug is usually considered most effective in the treatment of scarlet fever?
1. Sulfonamide
 2. Tetracycline
 3. Penicillin
 4. Streptomycin
41. Preventive measures for controlling the incidence of strongyloidiasis should include?
1. peeling the skin from fresh fruit
 2. properly storing unpasteurized dairy products
 3. thoroughly cooking meats
 4. wearing shoes
42. Which nonvenereal treponematoses produces pathologic changes usually confined to the skin?
1. Bejel
 2. Lues
 3. Pinta
 4. Yaws
43. The etiologic agent of syphilis is?
1. Chlamydia trachomatis
 2. Donovanias granulomatis
 3. Haemophilus ducreyi
 4. Treponema pallidum
44. In what age group is the occurrence of syphilis most prevalent?
1. 15-20 year olds
 2. 20-25 year olds
 3. 20-29 year olds
 4. 25-40 year olds
45. The usual incubation period of primary syphilis is _____ weeks.
1. 1 1/2
 2. 3
 3. 6
 4. 10
46. In attempting to establish the source of infection in a case of secondary syphilis, you would make an investigation of all sexual contacts in the preceding _____ months.
1. 2
 2. 3
 3. 6
 4. 12

47. Treatment of syphilis for penicillin sensitive persons includes which of the following drugs?
1. Erythromycin
 2. Doxycycline
 3. Streptomycin
 4. Sulfadiazine
48. An acute infectious disease caused by a bacterial toxin and characterized by abdominal rigidity and painful contractions of the facial and neck muscles is?
1. meningitis
 2. poliomyelitis
 3. rabies
 4. tetanus
49. The infectious agent for the above disease is an?
1. anaerobic endotoxin
 2. aerobic endotoxin
 3. anaerobic exotoxin
 4. aerobic exotoxin
50. For which cestoid infection is immediate medical management mandatory to prevent the occurrence of human cysticercosis?
1. *T. saginata*
 2. *T. solium*
 3. *T. spiralis*
 4. *T. trichiura*
51. The prevention of human infection from *Taenia saginata* is best accomplished by thoroughly cooking?
1. beef
 2. fish
 3. fowl
 4. pork
52. Toxoplasmosis is transmitted by?
1. eating domestic felines
 2. ingestion of infected oocysts in sandboxes
 3. person to person by direct contact
 4. consumption of undercooked fish
53. African sleeping sickness is transmitted by the bite of the?
1. *Anopheles* mosquito
 2. cone-nose bug
 3. trombiculid mite
 4. tsetse fly

54. The drug of choice for the treatment of African trypanosomiasis caused by *T. b. rhodesiense* is?
1. dieldrin
 2. melarsoprol
 3. suramin
 4. penicillin
55. Chronic sequelae of American trypanosomiasis include?
1. elephantiasis
 2. eosinophilia
 3. chagoma
 4. megacolon
56. The infectious agent for American trypanosomiasis is found in the?
1. feces of infected flies
 2. salivary glands of infected flies
 3. feces of infected kissing bugs
 4. salivary glands of infected kissing bugs
57. Which of the following intestinal nematoid infections may cause rectal prolapse?
1. Trichinosis
 2. Trichomoniasis
 3. Trichuriasis
 4. Trypanosomiasis
58. The sudden appearance of edema in the upper eyelids is a characteristic sign of what intestinal nematoid infection?
1. Taeniasis
 2. Toxoplasmosis
 3. Trachoma
 4. Trichinosis
59. To kill parasitic *trichinella spiralis*, fresh pork should be cooked to allow all parts to reach a temperature of at least _____ degrees Centigrade.
1. 50.5
 2. 71
 3. 75
 4. 160
60. In the United States the recommended therapy for active tuberculosis consists of?
1. INH only
 2. four-drug initial therapy
 3. tetracycline and Aureomycin
 4. no treatment is usually necessary

61. Which of the following is a World Health Organization (WHO) international measure for controlling tuberculosis?
1. BCG vaccine of all children
 2. quarantine of persons from endemic areas
 3. PPD testing of persons from high-prevalence countries
 4. chest x-rays upon immigration
62. Tularemia is easily contracted by humans through?
1. skinning carcasses of infected animals
 2. person-to-person contact
 3. inhaling airborne spores
 4. ingestion of raw fish
63. The appearance of rose spots on the trunk of an infected person is suggestive of which of the following communicable diseases?
1. Paratyphoid and typhoid
 2. paratyphoid and typhus
 3. Rubella and typhoid
 4. Rubella and typhus
64. How soon after the onset of typhoid infection will the agglutination reaction becomes positive?
1. Immediately
 2. During the second week
 3. During the third week
 4. Never
65. Food handlers diagnosed with typhoid should have at least _____ consecutive negative stool samples prior to being released from public health supervision.
1. two
 2. three
 3. four
 4. six
66. Brill-Zinsser disease is a recurrence of?
1. endemic typhus fever
 2. epidemic typhus fever
 3. typhoid fever
 4. rickettsialpox
67. What reservoir is responsible for maintaining louse-borne typhus fever?
1. Cattle
 2. Fowl
 3. Humans
 4. Rodents

68. The fatality rate for murine typhus is approximately what percent?
1. 1%
 2. 3%
 3. 5%
 4. 6%
69. *Rickettsia tsutsugamushi* is the etiologic agent of?
1. classical typhus
 2. flea-borne typhus
 3. louse-borne typhus
 4. mite-borne typhus
70. Scrub typhus is maintained in the mite population by means of?
1. adult infection from human hosts
 2. adult infection from wild rodent hosts
 3. larval infection from rodents
 4. transovarian passage
71. During what stage does the infected mite transmit scrub typhus?
1. Adult
 2. Larval
 3. Nymph
 4. all of the above
72. An acute bacterial disease caused by a gram negative bacilli *Yersinia pseudotuberculosis* is?
1. extra pulmonary tuberculosis
 2. plague
 3. yersiniosis
 4. woolsorters fever
73. The above disease is most commonly contracted through?
1. bite of an infected vector
 2. careless laboratory procedures
 3. defective ventilation systems
 4. fecally contaminated food or water

CONTROL OF COMMUNICABLE DISEASES
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ASSIGNMENT FIVE

Assignment 5 is a review of terminology and an overview/review of the total course as supported by the text material.

READING ASSIGNMENT: Control of Communicable Diseases Manual, 16th Edition, XVII through XXV and 533-545

1. Procedures of emergency character designed to limit the spread of a communicable disease that has developed widely within an area.
 1. Endemic
 2. Epidemic
 3. International
 4. Preventive

2. Measures intended to protect populations of one country against a risk of infection from another country.
 1. Endemic
 2. Epidemic
 3. International
 4. National

3. Living animals that under natural conditions afford subsistence or lodgment to an infectious agent under natural conditions are called?
 1. Carriers
 2. Contacts
 3. Hosts
 4. Reservoirs

4. Individuals who asymptotically harbor an infectious disease are called?
 1. Carriers
 2. Contacts
 3. Hosts
 4. Suspects

5. Animate or inanimate matter in which an infectious agent normally lives and multiplies, and on which it depends primarily for survival is?
 1. Carrier
 2. Host
 3. Reservoir
 4. Contact

6. What term describes a person who may have acquired an infectious disease as a result of exposure to a contaminated environment?

1. Carrier
2. Contact
3. Host
4. Reservoir

7. Which of the following rates are calculated in the same way?

1. Fatality and incidence
2. Incidence and mortality
3. Mortality and morbidity
4. Fatality and morbidity

8. If the NUMERATOR reflects the number of persons sick with a certain disease in a stated population at a particular time, and the DENOMINATOR reflects the number of persons in the population in which the sickness occurred, the QUOTIENT is called the _____rate.

1. Mortality
2. Incidence
3. Morbidity
4. Prevalence

9. Incidence rate can be expressed as cases per ?

1. 10
2. 100
3. 1,000
4. 10,000

10. The first invasion by a disease not previously recognized in that area is sufficient evidence of a potential epidemic.

1. True
2. False

11. Endemic refers to the constant presence of a disease or agent within a geographical area.

1. True
2. False

12. An epidemic is the occurrence in a geographical area of a specific illness clearly in excess of normal expectancy.

1. True
2. False

13. The time interval between the appearance of the first sign or symptom of a disease and the transmission of the infective agent to another person is called the incubation period.

1. True
2. False

14. Chemoprophylaxis is the use of a chemical substance to cure or limit an infectious disease.
1. True
 2. False
15. The presence of infection in a host without occurrence of recognizable clinical signs is called an inapparent infection.
1. True
 2. False
16. Hyperendemic expresses a constant presence of a disease at a high level of incidence.
1. True
 2. False
17. Infections originating in a medical facility are called nosocomial infections.
1. True
 2. False
18. Source of infection and source of contamination are interchangeable concepts.
1. True
 2. False
19. Any chemical or physical process that removes animal forms from a person is called ?
1. Disinfection
 2. Disinfestation
 3. Fumigation
 3. Repellent
20. Which of the following involves the use of gaseous agents to kill rodents?
1. Fumigation
 2. Disinfectants
 3. Insecticides
 3. Rodenticide
21. What types of chemical agents are applied to the skin of individuals to discourage insects from attacking?
1. Antiseptics
 2. Disinfectants
 3. Repellent
 4. Fumigant

22. An agent that is applied directly to the body for the purpose of killing an infectious organism is called a/an
1. Antiseptic
 2. Disinfectant
 3. Repellent
 4. Rodenticide
23. Passive immunity is acquired by inoculation of
1. Protective antibodies
 2. The agent itself in a killed form
 3. Fractions of the agent
 4. Live viruses
24. Molluscicides would be best used as a control measure for what disease?
1. Salmonellosis
 2. Anthrax
 3. Tularemia
 4. Schistosomiasis
25. A disease spread from person to person via contaminated fomites is said to be ___ transmission.
1. Direct
 2. Vehicle-borne
 3. Vector-borne mechanical
 4. Vector-borne biological

In answering questions 26 through 35, select the organism type listed in column B that is responsible for the disease listed in Column A.

Column A - Disease	Column B -Organism
26. Hydrophobia	1. Bacterial
27. Taeniasis	2. Fungal
28. Bartonellosis	3. Parasitic
29. woolsorter's' disease	4. Viral
30. Abdominal angiostrongyliasis	
31. Echinococcosis	
32. Monkeypox	
33. Trichophytosis	

34. Melioidosis

35. Erysipelas

In answering questions 36 through 45, select the WHO classification listed in Column B that is appropriate for the disease listed in Column A.

Column A - Disease	Column B - Classification
36. Plague	1. Class 1
37. Amebiasis	2. Class 2
38. Shigellosis	3. Class 3
39. Botulism	4. Class 4
40. Dengue Fever	
41. Lassa Fever	
42. Cholera	
43. Rabies	
44. Hansen's Disease	
45. Scrub typhus	
46. Traveler's diarrhea is most commonly caused by ?	
1. E. coli	
2. E. histolytica	
3. Giardia lamblia	
4. Salmonella	
47. The bear is a reservoir for the infectious agent of which of the following helminthic diseases?	
1. Diphyllbothriasis and trichomoniasis	
2. Diphyllbothriasis and trichinellosis	
3. Trichomoniasis and trichinellosis	
4. Trichuriasis and trichinellosis	

48. Which of the following is a cutaneous mycotic infection?
1. Cutaneous larva migrans
 2. Cutaneous leishmaniasis
 3. Impetigo
 4. Paronychia
49. The findings of grayish membranes or ulcers in the throat of the infected person is symptomatic of which of the following diseases?
1. Herpangina and diphtheria
 2. Infectious mononucleosis and thrush
 3. Influenza and tracheitis
 4. Scarlet fever and tonsillitis
50. Under microscopic laboratory testing, the identification of multinucleated, giant epithelial cells is indicative of which of the following?
1. Rubella
 2. Rubeola
 3. Varicella
 4. Variola

In answering questions 51 through 54, select the term listed in Column B that corresponds to the definition listed in Column A.

Column A - Definition	Column B - Term
51. A rate calculated using the number of deaths occurring in the population during a stated period of time as the numerator and the number of persons in the population in which they occur as the denominator.	1. Morbidity
	2. Fatality
	3. Mortality
	4. Prevalence
52. A rate expressed as a percentage of the number of persons diagnosed as having a specific disease who died as a result of it.	
53. A rate used to include all persons in the population under consideration who became ill during the stated period of time.	

54. A rate calculated using as the numerator the number of persons sick in a stated population at a particular time and as the denominator the number of persons in the population in which the condition occurs.

In answering questions 55 through 58, select from Column B the disease from which the diseases listed in Column A must be differentiated.

Column A	Column B
55. Undulant fever, typhoid fever, melioidosis	1. Amebiasis
56. Wuchereriasis, onchocerciasis	2. Paratyphoid fever
57. Candidiasis, syphilis, infectious mononucleosis	3. Loiasis
58. Shigellosis, balantidiasis, giardiosis, strongyloidiasis	4. Diphtheria
59. Yersiniosis is another name for plague. 1. True 2. False	
60. The use of disinfectant dips for fruits and vegetables is a proven method for controlling the spread of amebiasis in endemic areas. 1. True 2. False	
61. Hemorrhagic jaundice may be transmitted to man through direct contact with the urine of infected pet animals. 1. True 2. False	
62. Neonatal listeriosis is an infection transmitted from mother to unborn infant in utero or during its passage through the birth canal. 1. True 2. False	

63. Maduromycosis is a fungal disease appearing on the feet of people living in areas when going barefoot is common.
1. True
 2. False
64. People who have been on antimalarial prophylaxis may be accepted as blood donors three years after cessation of chemoprophylaxis.
1. True
 2. False
65. The clinical manifestations of melioidosis must be differentiated from tuberculosis.
1. True
 2. False
66. Petechial or rubella like rashes are commonly found on persons having aseptic meningitis.
1. True
 2. False
67. Molluscum contagiosum is a viral disease which results from contact with infective shellfish.
1. True
 2. False
68. Infectious mononucleosis CANNOT be transmitted through blood transfusions.
1. True
 2. False

In answering questions 69 through 74, select from Column B the pharmaceutical product intended to prevent the childhood infectious disease listed in Column A.

Column A	Column B
69. Rubella	1. Appropriate toxoid
70. Rubeola	2. Live attenuated vaccine
71. Pertussis	3. Killed bacteria vaccine
72. Tetanus	
73. Chickenpox	
74. Diphtheria	

In answering questions 75 through 80, select from Column B the mode of transmission that matches the disease listed in Column A

Column A	Column B
75. Paracoccidioidomycosis	1. Bite
76. Dengue hemorrhagic fever	2. Direct contact
77. Salmonellosis	3. Ingestion
78. Herpes simplex	4. Inhalation
79. Yellow fever	
80. Hepatitis A	

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COURSE EVALUATION QUESTIONNAIRE

This questionnaire is extremely important. The course that you have completed has undergone extensive development and revision. As an integral part of the continued success of the Navy Officer/Enlisted Correspondence Course Program, YOUR HELP IS NEEDED.

Please take the time to complete the questionnaire and return it to:

Naval School of Health Sciences
1001 Holcomb Road
Attn: Medical Correspondence
Portsmouth, VA 23708-5200

FROM: _____

PHONE: AUTOVON _____

COMMERCIAL _____

1. How long did it take you to complete this course?

2. Do you feel the learning objectives were achieved?

3. Did the assignments test your skills and knowledge gained by studying the text?

4. Would you recommend that a revision be made to any portion of this course? If yes, please write your suggestions below.